

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO**

IN RE	*	BKRTCY. NO. 18-05636 MCF
POGGI FUENTES, LUIS ANGEL	*	CHAPTER 13
xxx-xx-7621		
MILIAN SANTIAGO, MIGDALIA	*	
xxx-xx-3400	*	
<u>DEBTORS</u>		

**DEBTORS' NOTICE OF FILING OF AMENDED SCHEDULES "I" and "J"
OFFICIAL FORMS 106I & 106J**

TO THE HONORABLE COURT:

COME NOW, LUIS ANGEL POGGI FUENTES and MIGDALIA MILIAN SANTIAGO, the Debtors in the above captioned case, through the undersigned attorney, and very respectfully state and pray as follows:

1.The Debtors are hereby submitting ***Amended Schedules "I" and "J"***, dated June 13, 2019, herewith and attached to this motion.

2.The amended Schedules "I" and "J" are filed to reflect the Debtors' actual income, specifically the Joint Debtor's new income (previously unemployed) and the Debtors' actual expenses (the Debtors maintain separate households), in the above captioned case.

NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)

Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.

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Notice of Amended Schedules "I" & "J"
Case no. 18-05636 MCF13**

CERTIFICATE OF SERVICE

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the debtor and to all creditors and interested parties appearing in the master address list, hereby attached.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 13th day of June, 2019.

/s/Roberto Figueroa Carrasquillo
USDC #203614
RFIGUEROA CARRASQUILLO LAW OFFICE PSC
ATTORNEY FOR the DEBTORS/PETITIONERS
PO BOX 186 CAGUAS PR 00726
TEL NO 787-744-7699 FAX 787-746-5294
Email: rfigueroa@rfclawpr.com

Fill in this information to identify your case:

Debtor 1 LUIS ANGEL POGGI FUENTES

Debtor 2 MIGDALIA MILIAN SANTIAGO

(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION

Case number 3:18-bk-5636

(If known)

Check if this is:

☒ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

☐ Employed

☒ Not employed

Debtor 2 or non-filing spouse

☒ Employed

☐ Not employed

Pharma/Biotech/Med

Pro Unlimited Inc

999 Stewart Avenue Suite 100
Bethpage, NY 11714

1 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 243.33 \$ 15,383.33

3. +\$ 0.00 +\$ 0.00

4. \$ 243.33 \$ 15,383.33

Debtor 1 **POGGI FUENTES, LUIS ANGEL & MILIAN SANTIAGO,**
Debtor 2 **MIGDALIA**

Case number (if known) **3:18-bk-5636**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 243.33	\$ 15,383.33
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: Fed Withholding	5h. \$ 0.00	\$ 2,485.08
Fed MED/EE	\$ 0.00	\$ 223.08
Fed OASDI/EE	\$ 0.00	\$ 953.77
NC Withholding	\$ 0.00	\$ 780.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 4,441.93
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 243.33	\$ 10,941.40
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 1,760.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify:	8h. \$ 0.00	\$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 1,760.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,003.33	\$ 10,941.40
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 12,944.73	
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 LUIS ANGEL POGGI FUENTES

Debtor 2 MIGDALIA MILIAN SANTIAGO
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN
DIVISION

Case number 3:18-bk-5636
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☐ No

☒ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 20.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **POGGI FUENTES, LUIS ANGEL & MILIAN SANTIAGO,**
Debtor 2 **MIGDALIA**

Case number (if known) **3:18-bk-5636**

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	<u>140.00</u>
6b. Water, sewer, garbage collection	6b. \$	<u>90.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<u>238.00</u>
6d. Other. Specify: <u>ADT Security Alarm System</u>	6d. \$	<u>47.47</u>
7. Food and housekeeping supplies	7. \$	<u>461.26</u>
8. Childcare and children's education costs	8. \$	<u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$	<u>50.00</u>
10. Personal care products and services	10. \$	<u>65.00</u>
11. Medical and dental expenses	11. \$	<u>170.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<u>280.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	<u>50.00</u>
14. Charitable contributions and religious donations	14. \$	<u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<u>0.00</u>
15b. Health insurance	15b. \$	<u>127.00</u>
15c. Vehicle insurance	15c. \$	<u>0.00</u>
15d. Other insurance. Specify: <u>Auxilio Mutuo Hospital Health Plan</u>	15d. \$	<u>92.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
16. \$		<u>0.00</u>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	<u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$	<u>0.00</u>
17c. Other. Specify: _____	17c. \$	<u>0.00</u>
17d. Other. Specify: _____	17d. \$	<u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
18. \$		<u>0.00</u>
19. Other payments you make to support others who do not live with you.		
19. \$		<u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	<u>0.00</u>
20b. Real estate taxes	20b. \$	<u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$	<u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$	<u>0.00</u>
21. Other: Specify: <u>Travel expenses</u>	21. +\$	<u>650.00</u>
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	<u>2,480.73</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	<u>8,490.00</u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	<u>10,970.73</u>
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<u>12,944.73</u>
23b. Copy your monthly expenses from line 22c above.	23b. -\$	<u>10,970.73</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	<u>1,974.00</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain here:		

Debtor 1 **POGGI FUENTES, LUIS ANGEL & MILIAN SANTIAGO,**
Debtor 2 **MIGDALIA**

Case number (if known) **3:18-bk-5636**

Fill in this information to identify your case:

Debtor 1 **LUIS ANGEL POGGI FUENTES**
Debtor 2 **MIGDALIA MILIAN SANTIAGO**
(Spouse, if filing)
United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO, SAN JUAN DIVISION**
Case number **3:18-bk-5636**
(If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

☐

Official Form 106J-2

Schedule J-2: Your Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Do you and Debtor 1 maintain separate households?

☐ No. Do not complete this form.
☒ Yes

2. Do you have dependents? ☒ No

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

☐ Yes.

Fill out this information for each dependent.....

Dependent's relationship to Debtor 2

Dependent's age

Does dependent live with you?

☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **2,000.00**

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance

4a. \$ **0.00**
4b. \$ **0.00**

Debtor 1 **POGGI FUENTES, LUIS ANGEL & MILIAN SANTIAGO,**
Debtor 2 **MIGDALIA**

Case number (if known) **3:18-bk-5636**

4c. Home maintenance, repair, and upkeep expenses	4c. \$	0.00
4d. Homeowner's association or condominium dues	4d. \$	0.00
5. Additional mortgage payments for your residence , such as home equity loans	5. \$	0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	150.00
6b. Water, sewer, garbage collection	6b. \$	70.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	360.00
6d. Other. Specify: _____	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	800.00
8. Childcare and children's education costs	8. \$	0.00
9. Clothing, laundry, and dry cleaning	9. \$	600.00
10. Personal care products and services	10. \$	250.00
11. Medical and dental expenses	11. \$	300.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	700.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
14. Charitable contributions and religious donations	14. \$	300.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	100.00
15b. Health insurance	15b. \$	380.00
15c. Vehicle insurance	15c. \$	300.00
15d. Other insurance. Specify: _____	15d. \$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$	0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: _____	17c. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00
19. Other payments you make to support others who do not live with you. Specify: _____	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify: 401k	21. +\$	200.00
Professional Courses (English)	\$	300.00
Professional Courses (Excel)	\$	80.00
Savings to purchase car and laptop computer (job related)	\$	800.00
Travel expenses	\$	650.00
22. Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.	\$	8,490.00

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1	<u>LUIS ANGEL POGGI FUENTES</u>		
	First Name	Middle Name	Last Name
Debtor 2	<u>MIGDALIA MILIAN SANTIAGO</u>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>DISTRICT OF PUERTO RICO, SAN JUAN DIVISION</u>		
Case number (if known)	<u>3:18-bk-5636</u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ LUIS ANGEL POGGI FUENTES

LUIS ANGEL POGGI FUENTES

Signature of Debtor 1

Date June 13, 2019

X /s/ MIGDALIA MILIAN SANTIAGO

MIGDALIA MILIAN SANTIAGO

Signature of Debtor 2

Date June 13, 2019

Label Matrix for local noticing
104-3
Case 18-05636-MCF13
District of Puerto Rico
San Juan
Jun 13 15:11:23 AST 2019

Lejandro Bellver Espinosa Esq.
Afonso Bellver Espinosa Cond El Centro
10 Ave Munoz Rivera Ste 801
San Juan, PR 00918-3331

Banco Popular de Puerto Rico Special Loans
Special Loans Department (749)
PO Box 362708, San Juan, PR 00936-2708

U.S. Department of Education
Office of FedLoan Servicing
P.O. Box 69184
Harrisburg, PA 17106-9184

IGDALIA MILIAN SANTIAGO
PO BOX 116
YABUCOA, PR 00767-0116

Label Matrix
Available recipients 14
Passed recipients 0
Total 14

BANCO POPULAR PR - SPECIAL LOANS
PO BOX 362708
SAN JUAN, PR 00936-2708

Banco Popular de Puerto Rico
PO Box 362708
San Juan, PR 00936-2708

Fedloan
PO Box 60610
Harrisburg, PA 17106-0610

JOSE RAMON CARRION MORALES
PO BOX 9023884
SAN JUAN, PR 00902-3884

MONSITA LECAROS ARRIBAS
OFFICE OF THE US TRUSTEE (UST)
OCHOA BUILDING
500 TANCA STREET SUITE 301
SAN JUAN, PR 00901

US Bankruptcy Court District of P.R.
Jose V Toledo Fed Bldg & US Courthouse
300 Recinto Sur Street, Room 109
San Juan, PR 00901-1964

Banco Popular de Puerto Rico
PO Box 71375
San Juan, PR 00936-8475

Sears/Cbna
PO Box 6189
Sioux Falls, SD 57117-6189

LUIS ANGEL POGGI FUENTES
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YABUCOA, PR 00767-0116

ROBERTO FIGUEROA CARRASQUILLO
PO BOX 186
CAGUAS, PR 00726-0186